DPH Quality Improvement Summit Program-Level Performance Improvement Planning

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QUALITY IMPROVEMENT





Polling Question 5

How would you rate your expertise in Quality Improvement?

- 1. I am THE expert
- 2. I have substantial knowledge in QI
- 3. I have some knowledge
- 4. I have very limited knowledge
- 5. "I know nothing"





HHS Definition of Public Health Quality

Quality in public health is the degree to which policies, programs, services, and research for the population increase desired health outcomes and conditions in which the population can be healthy

HHS PHQF, 2008

COUNTY OF LOS ANGELES

Quality Improvement

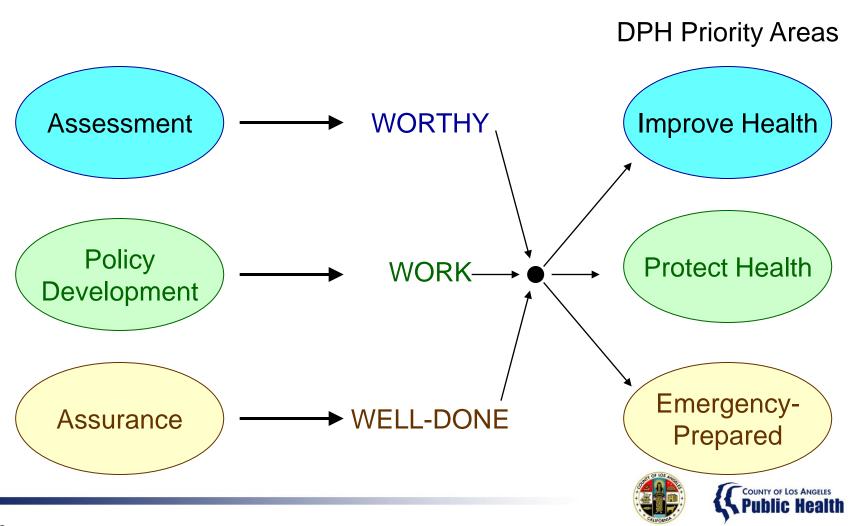
Quality improvement in public health is the use of a deliberate and defined improvement process, such as Plan-Do-Check-Act, which is focused on activities that are responsive to community needs and improving population health.

Bialek, Beitsch, Cofsky, et al. Unpublished data, 2009.

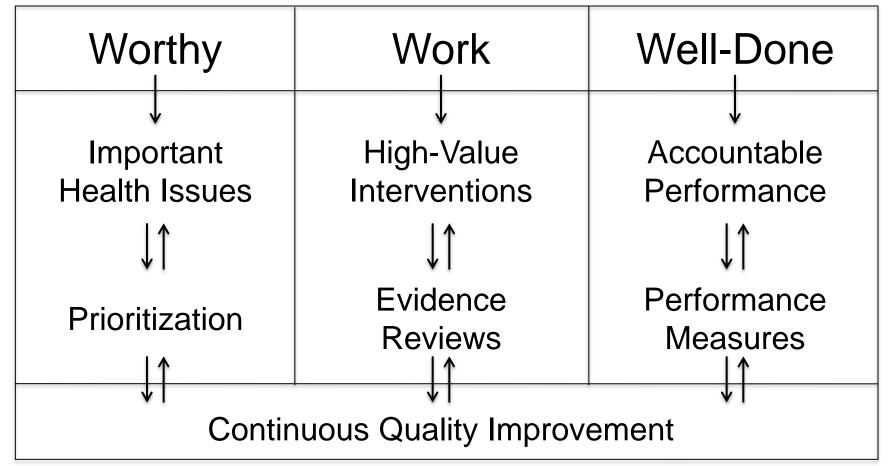




Core Functions of Public Health Implications for Quality



Elements of Public Health Quality







Polling Question 6

How would you rate the QI Culture within your program?

- 1. Very high QI Culture
- 2. High
- 3. Moderate
- 4. Low
- 5. Very low

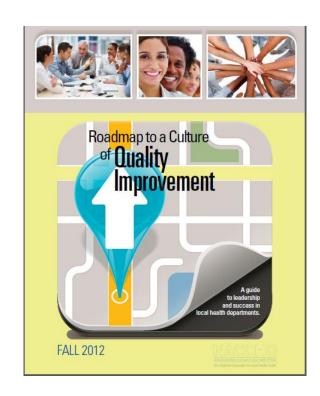




NACCHO Guide for Developing a Culture of QI

Six Phases:

- 1. No knowledge of QI
- Not Involved with QI Activities
- Informal or Ad Hoc QI Activities
- 4. Formal QI Activities
 Implemented in Specific
 Areas
- 5. Formal Agency-Wide QI
- 6. QI Culture



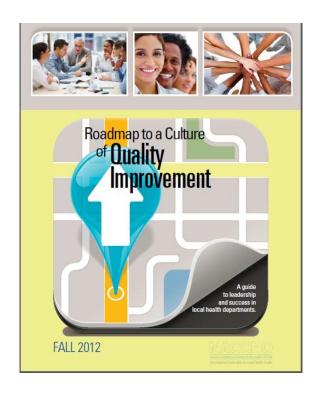




NACCHO Guide for Developing a Culture of QI

Foundational Elements:

- 1. Leadership Commitment
- Quality Improvement Infrastructure
- Employee Empowerment and Commitment
- 4. Customer Focus
- Teamwork and Collaboration
- Continuous Process Improvement







Polling Question 7

Which of the following do you think is most important as a next step to develop a QI Culture?

- 1. Leadership Commitment
- 2. QI Infrastructure
- 3. Employee Empowerment and Commitment
- 4. Customer Focus
- 5. Teamwork and Collaboration
- 6. Continuous Process Improvement



Presentation by TB Program





LA County PI Learning Collaborative

Performance Improvement

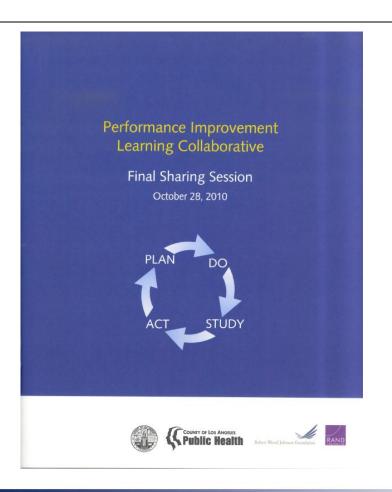
- 1. Acute Communicable Disease Control
- 2. Children's Medical Services
- 3. Emergency Preparedness
- 4. Office of AIDS Programs and Policy
- 5. Office of Senior Health
- 6. Office of Women's Health
- 7. Substance Abuse Control and Prevention
- 8. Tobacco Control and Prevention

- Engaging Community Stakeholders in Infectious Disease Prevention
- Increasing the Rate of Follow-up Care for CHDP Clients
- Improving the Submission Process for CDC Progress Reports
- Performance-Based Contract Monitoring
- Analyzing the Effective of an Electronic Listserv to Disseminate Health Information
- Increasing the Use of a Multilingual Hotline for Cardiovascular Risk Assessment
- Streamlining the Data Collection Tool for Process Improvement
- Assisting Subcontractors to Become More Effective Advocates





LA County PI Learning Collaborative Performance Improvement





FOUR-STEP APPROACH

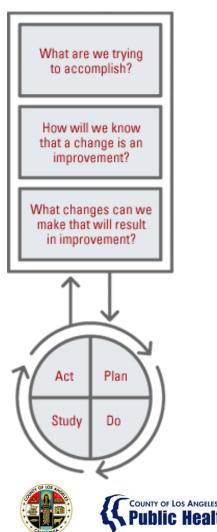
- 1. Identify the Aim
- 2. Map the Process
- 3. Measure Performance
- 4. Make Changes for Improvement





Institute of Healthcare Improvement MODEL FOR IMPROVEMENT

- Introduction
- Forming the Team
- Setting Aims
- Establishing Measures
- Selecting Changes
- Testing Changes
- Implementing Changes
- Spreading Changes







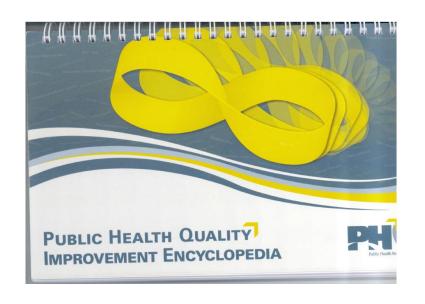
When to Use QI Tools

- To support new initiatives or change in an organization
- 2. To make incremental changes
- 3. As part of normal business operations
- 4. To improve specific gaps in performance





PH QI Encyclopedia



The book uses graphics and easy-to-understand text to show how and when to use twenty-two different tools to answer your most-pressing questions.

Expands your team's knowledge by providing clear and concise instructions that help improve performance, and start solving problems today.





Overview of PI Plans and Exercise





Innovation

- The terms "innovation" and "creativity" are often used interchangeably, but this is incorrect
 - "Creativity" is the process of coming up with ideas
 - "Innovation" is the process of bringing ideas to life
- Innovation is related to performance improvement through changes that increase productivity, efficiency, and quality.
- Innovation adds value by changing old organizational forms and practices





Opportunities for Innovation

GENERAL

- 1. Review plans and performance data to identify areas for improvement
- 2. Empower and reward workers for innovation

SPECIFIC

- 1. WORKFORCE: Devise strategies to identify group strengths and organize work activities around those strengths
- 2. PROCESS: Identify key processes and discuss which processes require improvement
- 3. INTERVENTIONS: Devise strategies to identify and leverage opportunities to use community partners as brokers (e.g., ready made projects for students)



Innovation - Examples

- Community Liaison Program
 - A strategy with high potential to engage community partners
- Environmental Health
 - Lettered grading system restaurants
- ACDC
 - Foto-novella approach to education about RAS
- Office of Women's Health
 - Phone bank / hotline screen and refer women for CPS's
- Substance Abuse Prevention and Control
 - Use of incentives in rapid PDSA-cycle to improve length of treatment
- Tobacco Control and Prevention Program
 - Development of a Policy Adoption Model





Summary

- Successful organizations have expertise in the application of QI tools and processes to solve problems, improve performance, and make organizational change
- DPH employees at all levels in the organization need to be informed and empowered to improve the work that they do (QI Culture)
- An integrated approach in which leaders advocate for the use of QI tools and PI Team members provide the technical support that may be needed is the way ahead for DPH





Next Steps

- Complete Summit evaluation will be email'd to you later today
- Requests to Update Performance Measures will be sent out tomorrow (March 1st) and will be due at the end of March
- Develop and submit a PI plan as part of the spring data collection (April / May)
- Executive Team will review and provide input to update the Report Card





Questions



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